

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>03/07/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>48</i>	<i>3/15/00</i>
FORMALITY REVIEW	<i>DW</i>	<i>72346</i>	<i>4-20-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	5/27/04
2	✓	✓	10/24/05
3	✓	✓	10/24/05
4	✓	✓	10/24/05
5	✓	✓	10/24/05
6	✓	✓	10/24/05
7	✓	✓	10/24/05
8	✓	✓	10/24/05
9	✓	✓	10/24/05
10	✓	✓	10/24/05
11	✓	✓	10/24/05
12	✓	✓	10/24/05
13	✓	✓	10/24/05
14	✓	✓	10/24/05
15	✓	✓	10/24/05
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18	✓	✓	10/24/05
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25	✓	✓	10/24/05
26	✓	✓	10/24/05
27	✓	✓	10/24/05
28	✓	✓	10/24/05
29	✓	✓	10/24/05
30	✓	✓	10/24/05
31	✓	✓	10/24/05
32	✓	✓	10/24/05
33	✓	✓	10/24/05
34	✓	✓	10/24/05
35	✓	✓	10/24/05
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41	✓	✓	10/24/05
42	✓	✓	10/24/05
43	✓	✓	10/24/05
44	✓	✓	10/24/05
45	✓	✓	10/24/05
46	✓	✓	10/24/05
47	✓	✓	10/24/05
48	✓	✓	10/24/05
49	✓	✓	10/24/05
50	✓	✓	10/24/05

Claim	Final	Original	Date
51	✓	✓	
52	✓	✓	
53	✓	✓	
54	✓	✓	
55	✓	✓	
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98	✓	✓	
99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
103	✓	✓	
104	✓	✓	
105	✓	✓	
106	✓	✓	
107	✓	✓	
108	✓	✓	
109	✓	✓	
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111	✓	✓	
112	✓	✓	
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141	✓	✓	
142	✓	✓	
143	✓	✓	
144	✓	✓	
145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)